File Number:
84-284
For the reporting period ended December 31. 200 I



OMB APPROVAL				
OMB Number.	3235-0337			
Expires:	July 31, 2003			
Estimated average	ge burden			
hours per full res	ponse 6.00			
Estimated average	ge burden			
hours per interm	ediate			
response	1.50			
Estimated average	ge burden			
hours per minimi	um			
response				

			~		_	response1.50
			SECURITIES AN	02023627	N	response
			Washi	ugton, D.C. 20549		hours per minimum
				•		response50
			FC	ORM TA-2		
		FORM FOR	R REPORTING A	CTIVITIES OF TRA	NSFER A	AGENTS
F	E(	GISTERED PURSUANT	TO SECTION 17	A OF THE SECURI	TIES EX	CHANGE ACT OF 1934
						1
		ATTENTION:		MISSTATEMENTS		
			CONSTITUTE I	TEDERAL CRIMINA	ALL YA OHO	AVEOUS.
			See 18 U.S.C. 10	01 and 15 U.S.C. 78ff	( <b>3</b> )	
					MAR S	6 2002
				MAD A 7 000		
i.	Fuli	name of Registrant as stated	in Question 3 of For	m TA-1 MAY C		
1	(Do:	not use Form TA-2 to change name	or address.)		3	66 / 2 7 2 V2
	Gr	aybar Electric Compa	nny, Inc.		St. 1	
2.	 a.	During the reporting period.	has the Registrant eng	aged a service company to	o perform a	ny of its transfer agent functions?
		(Check appropriate box.)				Sale 2 of 2 to 2 marks distributed and other lands and an advantage of property of the control o
		الم 🖂	☐ Some	X None		
			<u></u>	_		
ì		If the answer to subsection company(ies) engaged:	(a) is all or some, p	rovide the name(s) and i	transfer age	ent file number(s) of all service
		Name of Transfer Agent(s):			File	No. (beginning with 84- or 85- ):
						PROCESSED
						MICOLOGIL
				<del></del>		<u> </u>
				<del></del>		302 1 3 2002
						THOMSON
						FINANCIAL
(		During the reporting period, transfer agent functions?	has the Registrant bee	n engaged as a service co	mpany by a	named transfer agent to perform
		☐ Yes		No No		
		•			<b>6.3</b>	
(			as a service company	to perform transfer agent		ed transfer agent(s) for which the If more room is required, please
		Name of Transfer Agent(s)			File	No. (beginning with 84- or 85- 1:
		Name of Transfer Agent(s):			File	No. (beginning with 84- or 85- ):
		Name of Transfer Agent(s):			File	No. (beginning with 84- or 85- ):
		Name of Transfer Agent(s):			File	No. (beginning with 84- or 85- ):

Name of Transfer Agent(s):	File No. (beginning with 84- or 85-)

J.	a.	Comptroll Federal Do Board of	er of the Curre eposit Insuranc Governors of th and Exchange	ncy e Corporat e Federal I	ion Reserve Syst	eem	omy.	,			
	b.	During the rep				ded Form TA-l complete, or mis					which
			amendment(s) to file amendn able	nent(s)							
	c.	If the answer t	o subsection (l	o) is no, pro	ovide an exp	lanation:					
		If	the response	e to any o	f questions	s 4-11 below	is non	e or zer	o, enter "O.	"	
4.	Nu	mber of items re	eceived for trai	asfer durin	the reporti	ng period:				570	<u>)</u>
	<b>a</b> .	Total number	of individual se	ecurityhold	er accounts,	including acco	unts in	the Direc	t Registration	l 5 087	
	b.	Number of ind as of Decembe				estment plan an		-	-	(1	<u></u>
	c.	Number of ind	ividual securit	yholder DR	S accounts	as of December	31:		•••••	0	
	d.	Approximate p December 31:	percentage of i	ndividual s	securityholde	er accounts fro	m subs	ection (a)	in the follow	wing categories	as of
		Corporate Equity Securities	Corporate Debt Securities	]	Open-End investment Company Securities	Limited Partnersh Securitie	ip	Municip Secur	,	Other Securities	
		100%									
6.	Nu	mber of securiti	es issues for w	hich Regist	Tant acted in	the following	capacit	ies, as of	December 31	:	
				1	orporate curities	Open-End Investment Company	Part	mited nership curities	Municipal Debt Securities	Other Securities	
	a.	Receives items and maintains t securityholder	the master	Equity 3	Debt	Securities		<u></u> .			
		Receives items but does not m master security	for transfer aintain the holder files:	0							
	C.	Does not receive transfer but ma	intains the	0							

7.		ope of certain additional types of activities performed:  Number of issues for which dividend reinvestment plan and/or direct purchase plan
	a.	services were provided, as of December 31:
	b.	Number of issues for which DRS services were provided, as of December 31:
	c.	
		ii. amount (in dollars)
8.	a.	Number and aggregate market value of securities aged record differences, existing for more than 30 days, as of December 31:
		Prior   Current
		Transfer Agent(s) Transfer Agent (If applicable)
		i. Number of issues 0 0
		ii. Market value (in dollars) 0 0
	b.	Number of quarterly reports regarding buy-ins filed by the Registrant with its ARA (including the SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2):
	c.	During the reporting period, did the Registrant file all quarterly reports regarding buy-ins with its ARA (including the SEC) required by Rule 17Ad-11(c)(2)?
		X Yes No
	d.	If the answers to subsection (c) is no, provide an explanation for each failure to file:
9.	a.	During the reporting period, has the Registrant always been in compliance with the turnaround time for routine items as set forth in Rule 17Ad-2?
		X Yes No
		If the answer to subsection (a) is no, complete subsections (i) through (ii).
	•	i. Provide the number of months during the reporting period in which the Registrant was not in compliance with the turnaround time for routine items according to Rule 17Ad-2.
		ii. Provide the number of written notices Registrant filed during the reporting period with the SEC and with its ARA that reported its noncompliance with turnaround time for routine items according to Rule 17Ad-2.
10.		mber of open-end investment company securities purchases and redemptions (transactions) excluding dividend, interes distribution postings, and address changes processed during the reporting period:
	a.	Total number of transactions processed:0
	b.	Number of transactions processed on a date other than date of receipt of order (as ofs):

11. a. During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search
None	0	0

	er of lost securityholder accounts that have been	remitted to states during the
SIGNATURE:	The Registrant submitting this Form, and the p information contained in the Form is true, corr	person signing the Form, hereby represent that all the ect, and complete.
Manual signat	ture of Official responsible for Form:	Title: Vice President and General Counsel Telephone number: 314-573-9221
Name of Official responsible for Form: (First name, Middle name, Last name)		Date signed (Month/Day/Year):
T. F. Do	bwc	March 25, 2002

File Number	Supplement to Form TA-2
084-284	
For the reporting period ended December 31,2001	Full Name of Registrant Graybar Electric Company, Inc.

Use this schedule to provide the name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been engaged as a service company to perform transfer agent functions:

Name(s):	File No. (beginning with 84- or 85-):
	(beginning with 84- or 85-):
None	
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